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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3				ized Comr	_	'		Office Use	e Only		
1. NAME OF COMMITTEE (in	full)	TYPE OR PRI	IT ▼		mple: If typing r the lines.	g, type	12FE4M	5			
CHRIS EDWA	RDS F	OR CONGR	ESS							ı	
ADDRESS (number ar	nd street)	PO BOX 1310)5								
Check if different											
than previo reported. (A	LAS VEGAS					NV	89112				
2. FEC IDENTIFIC	CATION	NUMBER ▼		CITY			STATE A		ZIP CODE	NETDICT	
C C0051160	67			IS THIS REPORT	× NEW (N)	OR	AMENI (A)	DED	NV	01	
. 5/5- 6- 5-			1								
4. TYPE OF RE(a) Quarterly R		Choose One)	(b)	12-Day PRE -	Election Repo	rt for the:					
					Primary (12P)		General (12G)	Runo	ff (12R)	
April 18	Quarterly	y Report (Q1)			Convention (1	12C)	Special (1	12S)			
July 15	Quarterly	Report (Q2)				D D /				_	
Octobe	r 15 Quar	terly Report (Q3)		Election on	M M /	D D /			in the State of		
January	/ 31 Year-	End Report (YE)	(c) 3	 30-Day POS 1	-Election Rep	ort for the:					
				×	General (30G		Runoff (3	0R)	Speci	ial (30S)	
Termina	ation Repo	ort (TER)		Election on	M M /	06 /	Y Y Y Y Y 2012		in the State of	NV	
5. Covering Period	N	10 / 18	/ Y 2	012 Y	through	M M M	/ D D /	Y Y 201	Y Y Z		
I certify that I have e	examined	this Report and	o the be	est of my kno	owledge and k	pelief it is tr	ue, correct an	d comple	te.		
Type or Print Name	of Treasu	rer Tiffany Wad	dell								
Signature of Treasure	er <u>T</u>	iffany Waddell			Electronically I	Filed] [Date 12	/ 06	D / Y Y 2	2012	
NOTE: Submission of	false, erro	oneous, or incomp	ete infor	mation may s	ubject the pers	son signing t	this Report to t	he penalti	es of 2 U.S.(C. §437g.	
Office									FORM		
Use Only									sed 02/2003)		

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

CHRIS EDWARDS FOR CONGRESS

10 11 26 2012 18 2012 Report Covering the Period: From: To: **COLUMN A COLUMN B Election Cycle-to-Date** This Period Net Contributions (other than loans) **Total Contributions** (a) 10879.00 41671.00 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 10879.00 41671.00 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 8160.55 88324.91 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 8160.55 88324.91 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 93644.64 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 142000.00 Schedule C and/or Schedule D).....

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

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- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name CHRIS EDWARDS FOR CONGRESS 2012 26 2012 Report Covering the Period: From: 10 18 To: 11 I. RECEIPTS **COLUMN A COLUMN B COLUMN C Total this Period Election Cycle Total as of** Total for 06 2012 07 (date after general election) (date of general election) through 11. CONTRIBUTIONS (other than loans) FROM: (a) Individuals/Persons Other than 26 2012 Political Committees (last day of reporting period) Itemized (use Schedule A) 6414.00 26679.00 0.00 (ii) Unitemized 465.00 10992.00 0.00 (iii) Total of contributions from individuals 6879.00 37671.00 0.00 Political Party Committees 0.00 0.00 0.00 Other Political Committees 4000.00 0.00 4000.00

Report of Receipts and Disbursements

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FEC Form 3 (Revised 1/01)

	COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
	(d) The Candidate		
	0.00	0.00	0.00
	(e) TOTAL CONTRIBUTIONS (other than lo	ans) (add Lines 11(a)(iii), (b), (c) and (d))	
	10879.00	41671.00	0.00
12.	TRANSFERS FROM OTHER AUTHORIZED	COMMITTEES	
	0.00	0.00	0.00
13.	LOANS: (a) Made or Guaranteed by the Candidate		
	0.00	142000.00	0.00
	(b) All Other Loans		
	0.00	0.00	0.00
	(c) TOTAL LOANS (add Lines 13(a) and (b))		
	0.00	142000.00	0.00
14.	OFFSETS TO OPERATING EXPENDITURES	S (Refunds, rebates, etc.)	
	0.00	0.00	0.00
15.	OTHER RECEIPTS (Dividends, Interest, etc.)		
	0.00	0.00	0.00
16.	TOTAL RECEIPTS (add 11(e), 12, 13(c), 14	and 15)	
	10879.00	183671.00	0.00

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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	or Type Committee Name RIS EDWARDS FOR CONGRES	S				
Repo	rt Covering the Period: From: 10	18 2012	To: 11 26 2012			
II.	. DISBURSEMENTS					
	COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)			
17. OF	PERATING EXPENDITURES					
	8160.55	88324.91	1701.45			
18. TR	ANSFERS TO OTHER AUTHORIZED COMM	MITTEES				
	0.00	0.00	0.00			
	AN REPAYMENTS: Of Loans Made or Guaranteed by the Can	didate				
	0.00	0.00	0.00			
(b)	Of All Other Loans					
	0.00	0.00	0.00			
(c)	TOTAL LOAN REPAYMENTS (add Lines 1	9(a) and 19(b))				
	0.00	0.00	0.00			
20. RE (a)	FUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other Than Political Co	ommittees				
	0.00	0.00	0.00			
(b)	Political Party Committees					
	0.00	0.00	0.00			

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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	COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
	(c) Other Political Committees (such as PA	Cs)	
	0.00	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (ac	ld Lines 20(a), (b) and (c))	
	0.00	0.00	0.00
21.	OTHER DISBURSEMENTS		
	0.00	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 1	8, 19(c), 20(d) and 21)	
	8160.55	88324.91	1701.45
	III. NET CONTRIBUTIONS (OTHER (Note: Substitute in lieu of Line #6	THAN LOANS) of Summary Page for this report only; subtra	act Line 20(d) from Line 11(e))
	10879.00	41671.00	0.00
	IV. NET OPERATING EXPENDITUR	ES	
	(Note: Substitute in lieu of Line	#7 of Summary Page for this report only; sub	otract Line 14 from Line 17)
	8160.55	88324.91	1701.45
	V. CASH SU	MMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	DRTING PERIOD	90926.19
24.	TOTAL RECIEPTS THIS PERIOD (from Line	e 16)	10879.00
25.	SUBTOTAL (add Line 23 and Line 24)		101805.19
26.	TOTAL DISBURSEMENTS THIS PERIOD (f	rom Line 22)	8160.55
27.	CASH ON HAND AT CLOSE OF REPORTIN	NG PERIOD (subtract Line 26 from Line 25)	93644.64

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR	FOR LINE NUMBER:			PAGE		7	OF		18	
(che	(check only one)									
×	11a		11b		11c		110	d		
	12		13a		13b		14			15

		Statements may not be sold or used by any per name and address of any political committee	
	NAME OF COMMITTEE (In Full) CHRIS EDWARDS FOR CONC	GRESS	
<u> </u>	Full Name (Last, First, Middle Initial) Cindy Colletti		Date of Receipt
Λ.	Mailing Address 2575 Montessouri St		11 06 2012
	City Las Vegas	State Zip Code NV 89117	Transaction ID : SA11AI.4831
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
	Name of Employer Info requested Receipt For: 2012 Primary X General Other (specify)	Occupation Info requested Election Cycle-to-Date	In-kind - Office Space Rental
В.	Full Name (Last, First, Middle Initial) Dane & Associates Mailing Address 4145 Pequeno Ave		Date of Receipt
	City Las Vegas	State Zip Code NV 89120	11 05 2012 Transaction ID : SA11Al.4827
	FEC ID number of contributing federal political committee. Name of Employer	Occupation	Amount of Each Receipt this Period 2500.00 In-kind - Robo Calls
	Receipt For: 2012 Primary General Other (specify)	Election Cycle-to-Date	
<u> </u>	Full Name (Last, First, Middle Initial) Beverly Lozmun		Date of Receipt
٥.	Mailing Address 3240 La Mirada Ave City	State Zip Code	10 25 2012
	Las Vegas	NV 89120	Transaction ID : SA11AI.4791
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
	Name of Employer Info requested Receipt For: 2012 Primary General Other (specify)	Occupation Info requetsed Election Cycle-to-Date	1500.00 Contribution
Г	SUBTOTAL of Receipts This Page (optional)		6400.00
ΙT	'OTAL This Period (last page this line number	only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:			PAGE	:	8	OF		18	
(cł	(check only one)								
[X 11a	11b		11c		11	d		
	12	13a		13b		14			15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

or	for commercial purposes, other than using the	e name and address of any political committee	to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) CHRIS EDWARDS FOR CONC	GRESS	
<u> —</u> А.	Full Name (Last, First, Middle Initial) Lynn Thornhill		Date of Receipt
	Mailing Address 1305 Radwick Dr		11 01 2012
	City	State Zip Code NV 89110	Transaction ID : SA11AI.4825
	Las Vegas	NV 89110	-
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
	Name of Employer	Occupation	
	Info requested	Info requested	Contribution
	Receipt For: 2012 Primary General Other (specify)	Election Cycle-to-Date 314.00	
_	Full Name (Last, First, Middle Initial)		Date of Receipt
B.	Mailing Address		M M / D D / Y Y Y Y Y
	City	State Zip Code	
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
	Name of Employer	Occupation	L,,
	Receipt For:	Election Cycle-to-Date	
	Primary General Other (specify)		
_	Full Name (Last, First, Middle Initial)		Date of Receipt
C.	Mailing Address		M M / D D / Y Y Y Y Y
	City	State Zip Code	
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
	Name of Employer	Occupation	
	Receipt For: Primary General Other (specify)	Election Cycle-to-Date	
5	SUBTOTAL of Receipts This Page (optional)		14.00
1	TOTAL This Period (last page this line number	only)	6414.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

	FC	R LINE	NU	MBER:		PAGE	:	9 OF		18	
Use separate schedule(s)	(ch	(check only one)									
for each category of the		11a		11b	X	11c		11d			
Detailed Summary Page		12		13a		13b		14		15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) CHRIS EDWARDS FOR CONGRESS Full Name (Last, First, Middle Initial) AMODEI FOR NEVADA Date of Receipt Mailing Address 503 N DIVISION ST 2012 26 City State Zip Code Transaction ID: SA11C.4797 NV 89703 **CARSON CITY** FEC ID number of contributing Amount of Each Receipt this Period C00496760 federal political committee. 1000.00 Name of Employer Occupation Contribution Receipt For: 2012 Election Cycle-to-Date Primary X General 1000.00 Other (specify) Full Name (Last, First, Middle Initial)
ASSOCIATION OF AMERICAN PHYSICIANS AND SURGEONS POLITICAL ACTION COMMITTEE (AAPS-PAC) Date of Receipt Mailing Address 1601 N TUCSON BLVD 24 2012 SUITE 9 City State Zip Code Transaction ID: SA11C.4784 **TUCSON** A7 85716 FEC ID number of contributing C00041590 Amount of Each Receipt this Period С federal political committee. 2000.00 Name of Employer Occupation Contribution Receipt For: 2012 Election Cycle-to-Date Primary Meneral Control 2000.00 Other (specify) Full Name (Last, First, Middle Initial) OUR COUNTRY DESERVES BETTER PAC - TEAPARTYEXPRESS.ORG Date of Receipt Mailing Address PO BOX 984 2012 24 City State Zip Code Transaction ID: SA11C.4786 CA **WILLOWS** 95988 FEC ID number of contributing С C00454074 Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation Contribution Receipt For: 2012 Election Cycle-to-Date Primary General 1000.00 Other (specify) 4000.00 SUBTOTAL of Receipts This Page (optional)..... 4000.00 TOTAL This Period (last page this line number only).....

PAGE 10 18 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **X** 17 18 19a Detailed Summary Page 20a 20b 20c 21

ITEMIZED DISBURSEMENTS 19b Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) CHRIS EDWARDS FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement Asian Journal Publication 2012 Mailing Address 1150 Wlisire Blvd 11 01 City State Zip Code Amount of Each Disbursement this Period CA Los Angeles 90017 Purpose of Disbursement 400.00 Newpaper ad Transaction ID: SB17.4815 Candidate Name Category/ CHRIS EDWARDS FOR CONGRESS Type Office Sought: Disbursement For: 2012 House X General Senate Primary Other (specify) President NV State: District: Full Name (Last, First, Middle Initial) Capital Effects LLC Date of Disbursement Mailing Address PO Box 2719 07 2012 11 City State Zip Code Amount of Each Disbursement this Period DC 20013 Washington 1000.00 Purpose of Disbursement **FEC Compliance Services** Transaction ID: SB17.4818 Candidate Name Category/ CHRIS EDWARDS FOR CONGRESS Type Office Sought: House Disbursement For: 2012 Senate Primary General Other (specify) President State: NV District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Cimmarron Properties, LLC Mailing Address 2575 Montessouri St 06 2012 City State Zip Code Amount of Each Disbursement this Period Las Vegas NV 89117 225.52 Purpose of Disbursement Office Utilities Transaction ID: SB17.4816 Candidate Name Category/ CHRIS EDWARDS FOR CONGRESS Type Office Sought: Disbursement For: 2012 House X General Senate Primary

State: NV District: 01 1625.52 SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only).....

Other (specify)

President

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

TEMIZED DIODORGEMENTO	Detailed Summar	y Page	20a 20b 20c 21
Any information copied from such Reports and Statements or for commercial purposes, other than using the name an			rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) CHRIS EDWARDS FOR CONGRESS			
Full Name (Last, First, Middle Initial) A. Cindy Colletti Mailing Address 2575 Montessouri St City State Las Vegas NV Purpose of Disbursement In-kind - Office Space Rental Candidate Name Office Sought: House Senate Prima Other State: District:		Category/ Type	Date of Disbursement M M M / D D / 2012 Amount of Each Disbursement this Period 2400.00 Transaction ID: SB17.4833
Full Name (Last, First, Middle Initial) Dane & Associates Mailing Address 4145 Pequeno Ave			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Las Vegas NV Purpose of Disbursement In-kind - Robo Calls Candidate Name Office Sought: House Senate Prima President Other		Category/ Type	Amount of Each Disbursement this Period 2500.00 Transaction ID: SB17.4828
State: District: Full Name (Last, First, Middle Initial) El Concilio Hispanic Advertising Mailing Address 9014 Greek Palace Ave	((Specify)		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Las Vegas NV Purpose of Disbursement Radio ads Candidate Name CHRIS EDWARDS FOR CONGRESS Office Sought: House Senate Prima Other State: NV District: 01	For: 2012	Category/ Type	Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.4804
SUBTOTAL of Disbursements This Page (optional)			5300.00

TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

	FOR LINE NUMBER:				AGE	12	OF	18	
Use separate schedule(s)	(check only one)								
for each category of the Detailed Summary Page	X	17		18		19a		19	
Detailed Suffillary Page		20a		20b		20c		21	

		Jotanoa Garrinar	,		20a	20b	20c	21	
	ny information copied from such Reports and Statements may for commercial purposes, other than using the name and add								
	NAME OF COMMITTEE (In Full) CHRIS EDWARDS FOR CONGRESS	, po							
۹.	Full Name (Last, First, Middle Initial) Pay Pal			M	te of Disb	D D /	Y	Y	
	Mailing Address 2211 N First St				11	07	2012		
	City State San Jose CA	Zip Code 95131		Am	ount of E	ach Disburs	ement this P	eriod	
	Purpose of Disbursement Credit card processing fees			Trans	saction ID	: SB17.482	601.4	45	
	CHRIS EDWARDS FOR CONGRESS		Category/ Type			,-			
	Office Sought: House Disbursement For:	X General							
3.	Full Name (Last, First, Middle Initial) United States Post Office				te of Disb	ursement	Y " Y " Y " ,	Y	
	Mailing Address 4885 E. Carey Ave			10	31	2012			
	City State Las Vegas NV	Zip Code 89115		Am	ount of E	ach Disburs	ement this P	eriod	
	Purpose of Disbursement Postage			Trans	225.00 Transaction ID : SB17.4812				
	Candidate Name CHRIS EDWARDS FOR CONGRESS		Category/ Type						
	Office Sought: House Disbursement For: Primary	X General							
`	Full Name (Last, First, Middle Initial)			Dat	te of Disb	ursement			
Э.	Mailing Address			М	M /	D D /	Y Y Y Y	′	
	City State Zip C	Code		Am	ount of E	ach Disburs	ement this P	eriod	
	Purpose of Disbursement								
	Candidate Name		Category/ Type						
	Office Sought: House Senate President State: Disbursement For: Primary Other (special special speci	General cify)							
s	SUBTOTAL of Disbursements This Page (optional)						826.4	45	
	OTAL This Period (last page this line number only)						7751.9	97	
-					7	7			

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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X	13a
	13b

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LOANS (check only one) Detailed Summary Page Transaction ID: SC/10.4207 NAME OF COMMITTEE (In Full) CHRIS EDWARDS FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary CHRISTOPHER EDWARDS General Mailing Address Other (specify) ulletPO BOX 13105 City State ZIP Code NV89112 LAS VEGAS Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 100.00 0.00 100.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 01^M 03 Ž012 0.00 On Demand % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 100.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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	13b

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LOANS (check only one) Detailed Summary Page Transaction ID: SC/10.4209 NAME OF COMMITTEE (In Full) CHRIS EDWARDS FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary CHRISTOPHER EDWARDS General Mailing Address Other (specify) \blacktriangledown PO BOX 13105 City State ZIP Code NV89112 LAS VEGAS Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 1000.00 0.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 01 ^M ^D12 Ž012 0.00 On Demand % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 1000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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	13b

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LOANS (check only one) Detailed Summary Page Transaction ID: SC/10.4211 NAME OF COMMITTEE (In Full) CHRIS EDWARDS FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary CHRISTOPHER EDWARDS General Mailing Address Other (specify) \blacktriangledown PO BOX 13105 City State ZIP Code NV89112 LAS VEGAS Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 900.00 0.00 900.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 01^M Ž012 0.00 On Demand % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 900.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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LOANS (check only one) Detailed Summary Page Transaction ID: SC/10.4210 NAME OF COMMITTEE (In Full) CHRIS EDWARDS FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary CHRISTOPHER EDWARDS General Mailing Address Other (specify) \blacktriangledown PO BOX 13105 City State ZIP Code NV89112 LAS VEGAS Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 02^M 08 Ž012 0.00 On Demand % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s)

FOR LINE NUMBER:

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for each category of the **LOANS** (check only one) Detailed Summary Page Transaction ID: SC/10.4212 NAME OF COMMITTEE (In Full) CHRIS EDWARDS FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary CHRISTOPHER EDWARDS General Mailing Address Other (specify) \blacktriangledown PO BOX 13105 City State ZIP Code NV89112 LAS VEGAS Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 03^M 05 Ž012 0.00 On Demand % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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(check only one) Detailed Summary Page Transaction ID: SC/10.4213 NAME OF COMMITTEE (In Full) CHRIS EDWARDS FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary CHRISTOPHER EDWARDS General Mailing Address Other (specify) \blacktriangledown PO BOX 13105 State ZIP Code City NV89112 LAS VEGAS Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 125000.00 0.00 125000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 29 ^M 03^M Ž012 0.00 On Demand % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 125000.00 TOTALS This Period (last page in this line only) 142000.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.